

fistulas without radical surgical procedures. Arteriovenous malformations of the spinal cord can be similarly occluded if fed by a single vessel.

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### Lymph Node Metastasis in "Apparently" Localized Prostate Cancer

AS IS TRUE in most tumors, the therapeutic approach to prostatic carcinoma is largely governed by the determination of the anatomic extent of disease. Recently, increasing attention has been focused on the importance of lymph node metastasis in this disease, which traditionally has been felt to involve the bones early and the lymph nodes only as a late manifestation. Lymphography is used to detect lymph node metastasis in patients with prostatic cancer, with the overall incidence of positive studies ranging up to two

thirds of all cases, depending on the type of patients studied (that is, the stage of the disease and whether there had been earlier treatment) and probably also on varying lymphographic criteria. Early results are of interest from a continuing study (Bagshaw and co-workers) of unselected, previously untreated patients with "apparently" localized prostatic carcinoma (that is, no evidence of metastasis by findings from standard clinical, laboratory, nuclear medicine and radiographic studies excluding lymphography). In about a third of these patients with "apparently" localized disease there was histologically documented lymph node metastasis. In such patients lymphography has an approximate 80 percent accuracy, with most errors occurring as false-negative findings.

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